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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re U.S. Patent Application of**

**FURUKAWA et al.**

**Application Number: 09/805,884**

**Filed: March 15, 2001**

**For: FORM PROCESSING SYSTEM, MANAGEMENT  
SYSTEM OF FORM IDENTIFICATION  
DICTIONARY, FORM PROCESSING TERMINAL AND  
DISTRIBUTION METHOD OF FORM  
IDENTIFICATION DICTIONARY**

**Attorney Docket No. ASAM.0007**



**Art Unit 2176**

**Examiner  
Nguyen-Ba, Paul H.**

**Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

**COVER LETTER**

Sir:

☒ The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	17	17	XXX (Over 20)	x \$50	0
Independent Claims	4	7	4 (Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
				TOTAL	0.00

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- ☒ Response to Office Action  
(with Claim Amendments)
- ☐ Substitute Specification
- ☐ Preliminary Amendment
- ☐ Information Disclosure Statement

- ☐ Petition for Extension of Time
- ☐ Terminal Disclaimer
- ☐ Letter to Draftsperson w/\_\_\_ sheets of  
replacement drawings
- ☐ Other \_\_\_\_\_

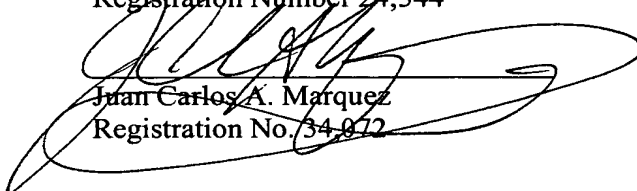
[ ] Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.

[ ] A check in the amount of **\$0.00** to cover the \_\_\_\_\_ fee is enclosed.

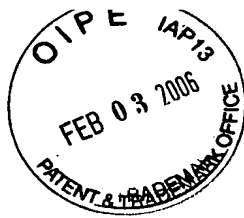
[x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

\_\_\_\_\_  
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(703) 641-4200  
**February 3, 2006**



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<b>Application Number: 09/805,884</b>	)	
	)	<b>Examiner</b>
<b>Filed: March 15, 2001</b>	)	<b>Nguyen-Ba, Paul H.</b>
	)	
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<b>SYSTEM OF FORM IDENTIFICATION</b>	)	
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<b>DISTRIBUTION METHOD OF FORM</b>	)	
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	)	
<b>Attorney Docket No. ASAM.0007</b>	)	
	)	
<b>Commissioner of Patents</b>		
<b>P.O. Box 1450</b>		
<b>Alexandria, VA 22313-1450</b>		

**RESPONSE AND AMENDMENT UNDER 37 C.F.R. §1.111**

Sir:

This is in response to the office action dated November 3, 2005, in the above identified application, the period for response to which is set to expire on February 3, 2006. Please review the remarks as follows: